

**ADULT SUBCUTANEOUS INSULIN ORDERS**  
(Internal Medicine)

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**1. Scheduled Subcutaneous Insulin**

<b>Basal Insulin</b>	BREAKFAST Give _____ units <input type="checkbox"/> NPH <input type="checkbox"/> Glargine (Lantus)	LUNCH	DINNER Give _____ units <input type="checkbox"/> NPH <input type="checkbox"/> Glargine (Lantus)	BEDTIME Give _____ units <input type="checkbox"/> NPH <input type="checkbox"/> Glargine (Lantus)
<input type="checkbox"/> <b>Prandial Insulin*</b>	BREAKFAST Give _____ units <input type="checkbox"/> Aspart (NovoLog) <input type="checkbox"/> Regular insulin	LUNCH Give _____ units <input type="checkbox"/> Aspart (NovoLog) <input type="checkbox"/> Regular insulin	DINNER Give _____ units <input type="checkbox"/> Aspart (NovoLog) <input type="checkbox"/> Regular insulin	BEDTIME <i>No scheduled insulin, administer supplemental only</i>
<input type="checkbox"/> <b>Continuous feeds or NPO (q6h insulin)</b>	0600 Give _____ units Regular insulin	1200 Give _____ units Regular insulin	1800 Give _____ units Regular insulin	2400 Give _____ units Regular insulin

\*Give Aspart with the meal, Regular insulin 30 minutes prior to the meal

**2. Check Blood glucose (BG)**

- ☐ Before meals and at bedtime
- ☐ Every 6 hours (Patients who are NPO or getting tube feeds)
- ☐ Other \_\_\_\_\_

**3. Supplemental Subcutaneous Insulin Algorithm**

- Add 1 unit to the scheduled prandial or q6h insulin bolus for each \_\_\_\_\_ mg/dL above the preprandial target of \_\_\_\_\_ mg/dL

*Note to prescriber: To estimate the glucose lowering of 1 unit of insulin, divide 1700 by the total daily dose of insulin. Eg. If a patient requires 68 units or insulin per day  $1700/68 =$  a correction factor of 1 unit of insulin for every 25 BG*

- Subtract 1 unit from the scheduled prandial or q6h insulin bolus for each 10mg/dl below the target of 90 mg/dl

**4. Hypoglycemia protocol (blood glucose less than 60)**

- A. For patient who can take PO, give 20g of fast acting carbohydrate:  
6 oz fruit juice or regular soda: 12 oz low fat milk
- B. If patient cannot take PO, give 25ml of Dextrose 50% IV push
- C. If IV access is not available, give Glucagon 1mg IM
- D. Check BG q15 minutes and repeat until BG >100
- E. Notify house officer when BG is >100 to determine if dose adjustment of scheduled insulin is warranted

Signed \_\_\_\_\_

Pager \_\_\_\_\_